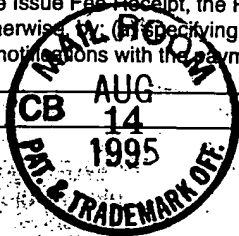


# PART B—ISSUE FEE TRANSMITTAL

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise. (a) by specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
<p>THOMAS R LAMPE BIELEN PETERSON &amp; LAMPE 1990 N-CALIFORNIA BLVD SUITE 720 WALNUT CREEK CA 94596</p> <p>34M2/0601</p>	INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	CO-INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	<input type="checkbox"/> Check if additional changes are on reverse side



SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/375,530	01/19/95	010	FREAY, C	3403 05/15/95
First Named Applicant: PERMAR, CLARK				

TITLE OF INVENTION  
LIQUID TREATMENT APPARATUS FOR PROVIDING A FLOW OF PRESSURIZED LIQUID

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3 PERMAR3	417-313.000	155	UTILITY	YES	\$605.00	08/15/95

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
<p>THOMAS R. LAMPE BIELEN, PETERSON &amp; LAMPE 1990 N. California Boulevard, Suite 720 Walnut Creek, CA 94596</p>	<p>1 THOMAS R. LAMPE</p> <p>2</p> <p>3</p>

100 WT 08/21/95 08375530 1:242 605.00 CK  
100 WT 08/21/95 08375530 1 561 30.00 CK

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE:		XX Issue Fee	XX Advance Order - # of Copies 10
(2) ADDRESS: (CITY & STATE OR COUNTRY)		6b. The following fees should be charged to:	
		DEPOSIT ACCOUNT NUMBER 02-2273	
		(ENCLOSE PART C)	
		<input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies	
		XX Any Deficiencies in Enclosed Fees	
<p>AX <input checked="" type="checkbox"/> This application is NOT assigned.</p> <p><input type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.</p> <p><input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.</p> <p><b>PLEASE NOTE:</b> Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.</p>		<p>The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to this application identified above.</p> <p>(Authorized Signature) <i>[Signature]</i> (Date) 8/10/95</p> <p>NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.</p>	

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## Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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on August 10, 1995

(Date)

ANGIE BINGGELI

(Name of person making deposit)

(Signature)

*Angie Binggeli*  
August 10, 1995

(Date)

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